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Potential persons who are to respond to the collection of information 1972 (6-contained in this form are not required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

MAY 1 0 2006

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549



FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL	
OMB Number: 3235-0076	
Expires: May 31, 2005	
Estimated average burden hours per response. RO	ł
MAY 1	2 2004

SEC USE ONLY
Prefix Serial
DATE RECEIVED

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) UNITS CONSISTING OF 8% CONVERTIBLE PROMISSORY NOTES AND WARRANTS TO PURCHASE COMMON STOCK (BOTH THE UNITS AND THE UNDERLYING COMMON STOCK ARE BEING ISSUED PURSUANT TO EXEMPTION).

Filing Under (Check box(es) that apply): $[] \underline{Rule\ 504} \quad [] \underline{Rule\ 505} \quad [X] \underline{Rule\ 506} \quad [] \underline{Section\ 4(6)} \quad [] \underline{ULOE}$

Type of Filing: [X] New Filing [] Amendment



	A. BASIC IDENTIFICATION DATA
1. Enter the information re	quested about the issuer
Name of Issuer ([] check EPIXTAR CORP.	if this is an amendment and name has changed, and indicate change.)
11900 BISCAYNE BOUI	ces (Number and Street, City, State, Zip Code) LEVARD, MIAMI, FLORIDA 33181 ding Area Code): (305) 503 - 8600
Address of Principal Busin Telephone Number (Inclu- (if different from Executive	
DEVEPMENT AND ACC	ess OPERATIONS THROUGH SUBSIDIARIES INCLUDING QUISITION OF CALL CENTERS, PROVIDING OUTSOURCING NTERNET PROVIDER SERVICES FOR SMALL BUSINESSES, ATIONS SERVICES
Type of Business Organiz	ation
[X] corporation	[] limited partnership, already formed [] other (please specify):
[] business trust	[] limited partnership, to be formed
	Month Year
Actual or Estimated Date	of Incorporation or Organization: [6] [1994] [X] Actual [] Estimated
-	on or Organization: [FL] all Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)
CENERAL INCERNATION	110

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner	[] Executive Officer	[X] Director [] General and/o Managing Partner
Full Name (Last nam Miller, Martin	ne first, if individual)	, , , , ,	
	ice Address (Number and Stree BOULEVARD, MIAMI, FLOR		ode)
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[X] Director [] General and/o Managing Partner
Full Name (Last nam Berman, David	ne first, if individual)		1964 (
	ice Address (Number and Stree BOULEVARD, MIAMI, FLOR		ode)

Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	[X] Executive Officer	[X] Director [] General and/or Managing Partner
Full Name (Last nam Greenman, Irving	ne first, if individua	ai)	100		
Business or Residen 11900 BISCAYNE I				de)	
Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	[X] Executive Officer	[X] Director [] General and/or Managing Partner
Full Name (Last nam Rhodes, William D.	ne first, if individua	al)			
Business or Resider 11900 BISCAYNE				de)	
Check Box(es) that Apply:	[] Promoter [Beneficial Owner	[X] Executive Officer	[X] Director [] General and/or Managing Partner
Full Name (Last nan Srour, David	ne first, if individua	al)			
Business or Resider 11900 BISCAYNE	•			de)	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[X] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last nam Sablon, Ricardo	ne first, if individua	al)			
Business or Resider 11900 BISCAYNE	•			de)	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[X] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last nan Dunne, Gerald	ne first, if individua	al)			
Business or Resider 11900 BISCAYNE	,			de)	

.

Check Box(es) that Apply:	[]Promoter[]E	Beneficial Owner		xecutive Officer	[] Director [General and/or Managing Partner
Full Name (Last nam Gambone, Deborah	e first, if individual)	······································				
Business or Residen 11900 BISCAYNE E	•				e)	·
Check Box(es) that Apply:	[] Promoter [X]	Beneficial Owner	[]	Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last nam Myatt, Stanley	e first, if individual)	rage			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Business or Residen 11900 BISCAYNE B					e)	
Check Box(es) that Apply:	[] Promoter[]	Beneficial Owner	[]	Executive Officer	[X] Director	[] General and/o Managing Partner
Full Name (Last nam Elan, Kenneth	e first, if individual)					
Business or Residen 11900 BISCAYNE I	•		-	•	e)	
Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	[]	Executive Officer	[X] Director [] General and/or Managing Partner
Full Name (Last nam Cooney, John	e first, if individual)					
Business or Residen 11900 BISCAYNE I					e)	
(Use blank she	eet, or copy and u	se additiona	al copies	of this she	et, as necessar	/.)
	B. INFORM	MATION ABO	OUT OF	ERING		
1. Has the issuer soloffering?						Yes No [] [X]
2. What is the minim	Answer also in um investment that			-		\$ n/a

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											min	imur	n	
3. Doe	s the of	fering pe	ermit joir	nt owner	ship of a	single ι	ınit?	•••••			Yes [X		No []
directly connect persor list the	y or indir ction wit or ager name o	rectly, a h sales nt of a b of the bro	ny comn of secur roker or oker or c	nission d ities in t dealer i dealer. If	or similar he offeri registere f more th	remuneing. If a p d with th an five (eration for erson to e SEC a 5) persor	r solicitat be listed nd/or wit ns to be l	tion of put is an as h a state listed are	or given, rchasers sociated or states associat ker or de	in s, ted			
Full Na	ame (La	st name	first, if i	ndividua	al) Maxi	m Group	LLC was	retained	as a place	ment age	nt			
Busine	ss or R	esidenc	e Addre:	ss (Num	ber and	Street, 0	City, Stat	e, Zip Co	ode)					
Name	of Asso	ciated B	roker or	Dealer										
States	in Whic	h Perso	n Listed	Has So	licited or	Intends	to Solici	t Purcha	sers (see	append	ix)			
(Chec	k "All S	States"	or chec	k indivi	idual Sta	ates)				[] All St	ates		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID)]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[M	O]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[P/	4]	
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PI	R]	
(Use bla	nk she	et, or co	py and	use add	litional	copies o	f this sh	eet, as r	ecessar	y.)	•		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$_1,000,000	\$_1,000,000
Equity	\$	\$
[] Common [] Preferred Convertible Securities (including warrants)notes and warrants	\$ <u>1,000,000</u>	\$_1,000,0000
Partnership Interests	\$	\$
Other (Specify: common stock underlying warrants).	\$	\$
Total	\$ 1,000,000	\$1,000,000

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
Accredited Investors Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE.	Number Investors 	Aggregate Dollar Amount of Purchases \$ 1,000,000 \$ \$
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
Type of offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		. \$
Rule 504		_\$
Total		_ \$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) nonaccountable Other Expenses (identify) Finders' Fees Total]\$]\$]\$]\$]\$]\$]\$]\$
 b. Enter the difference between the aggregate offering price given in responder of the large of the purpose of the large of th		\$ 820,000

listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

Payments to Officers,	
Directors, &	Payments To Others
	[]\$
	[]\$
[]\$	_ []\$
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11\$	[]\$
	[X] \$100,000
	[]\$
1	
= []\$	[X] <u>\$720,000</u>
\$	[X] \$820,000
••	[X] \$ 1,000,000
ned duly authorize an undertaking b	
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an undertaking tritten request of it ursuant to paragrate	oy the issuer s staff, the aph (b)(2) of Date S Ons. (See 18
	Officers, Directors, & Affiliates [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date /
EPIXTAR CORP.	J. Jones 5/2/04
Name of Signer (Print or Type)	Tritle (Print or Type)
IRVING GREGGERA	1 CFO

APPENDIX

1	2								
			3		5 Disqualification under State				
	Intend to sell to non-accredited investors in State (Part B-Item 1) Type of security and aggregate offering price offered in state (Part C-Item 1)			Type of investor and amount purchased in State (Part C-Item 2)				under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK							İ		
AZ							1		
AR									
CA		X	Units of Convertible notes and warrant \$100,000 per unit	1	\$100,000				Х
СО									
СТ									
DE									
DC			ه جمير <u>و من ال</u> استون المستون			****			
FL									
GA									
HI									
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
МА		X	Units of Convertible notes and warrant \$100,000 per unit	3	\$250,000				Х
MI	-								

MN			<u> </u>			
MS						
МО	<u> </u>					
MT			***************************************			
NE						
NV						
NH						
INIT		This of Connection				
NJ	X	Units of Convertible notes and warrant \$100,000 per unit	1	\$50,000		X
NM						
NY	x	Units of Convertible notes and warrant \$100,000 per unit	6	\$400,000		X
NC	Ī					
ND						
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ОК						
OR						
PA						
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TX			· · · · · · · · · · · · · · · · · · ·			
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VT						
VA						
WA	Ì					
wv	İ		<u> </u>			
WI	X	Units of Convertible notes and warrant \$100,000 per unit	1	\$100,000		X
WY						
PR						

http://www.sec.gov/divisions/corpfin/forms/formd.htm Last update: 06/06/2002